

CHAPTER 5

CHAPTER 5

ELIGIBILITY CHECKINGA. GENERAL

1. The procedures in this chapter are for use by medical and dental personnel who are responsible for DEERS implementation in MTFs and DTFs, by **FIs** responsible for processing CHAMPUS claims, by personnel officers involved in **DEERS** enrollment, and by anyone involved in eligibility checking. This section details the steps to be taken by these personnel when checking eligibility for benefits.

2. Medical and dental liaison officers shall maintain a close relationship with personnel and information liaison officers concerned with ongoing DEERS activities at the local level. Regularly scheduled meetings should be held with representatives from these functional areas.

3. The DEERS East and West Coast Eligibility Centers confirm individual eligibility for benefits by responding to queries from personnel in MTFs and **DTFs**, as well as from other users. Each center has a full Eligibility Data Base and services eligibility needs for approximately half of CONUS.-

B. TYPES AND FREQUENCY OF ELIGIBILITY CHECKS

1. Eligibility checks shall be performed at **MTFs** and DTFs with these initial priorities: (1) to determine whether a beneficiary is enrolled, (2) to identify any errors on the data base, and (3) to confirm beneficiary eligibility. Eligibility checks at MTFs and DTFs shall be conducted with either of the following:

- a. A CRT terminal; or
- b. A telephone.

2. The minimum eligibility y-checking requirements are the following:

- a. 25 percent of all outpatient visits.
- b. 100 percent of all admissions.
- c. 25 percent of all dental visits.
- d. 10 percent **of** pharmacy outpatients (to include **all** patients with civilian prescriptions).

3. Eligibility checks shall be performed **on** a prepayment basis by CHAMPUS FIs who have contracted to process CHAMPUS claims. These checks shall be performed by use of one of the following computer-to-computer methods:

- a. On-line real-time system access; or
- b. Batch system processing.

4. Where needed, the contractor shall furnish augmenters to assist in CRT operations for several weeks after the intensified enrollment period ends. These

personnel are intended to help initiate CRT eligibility checking and generally should not be used **as** telephone operators. After they leave, it is the responsibility of the facility to continue the procedures.

5. When a patient enters an MTF or DTF, a check (query) shall be made to determine eligibility. Procedures for making this query are explained below. Further action may be required based upon the outcome of this query.

a. If the patient is enrolled and all information is accurately presented on the CRT screen, no further action is required.

b. If the patient is enrolled but there are errors on the CRT screen, or if the patient is not enrolled, the **DEERS** Enrollment Follow-up Form, DD Form 2270, shall be completed. Refer to section "D" on page 5-18 for use of this form.

c. In accordance with DoD policy, the medical requirements of the beneficiary are paramount. No one shall be denied treatment at military hospitals and clinics solely because his or her name does not appear on the data base. As usual, those who are proven ineligible may be billed for services rendered, or legal action may be taken.

c. INQUIRY PROCEDURES

There are three methods of using DEERS to determine whether a beneficiary is enrolled and entitled to benefits. In some MTFs and DTFs, a CRT terminal is used to perform the eligibility check by query directly to the data base. In other facilities, telephones are used to call the Eligibility Center, where information will be given over the phone to the CRT operator who then queries the data base. At the CHAMPUS FIs, prepayment eligibility checking **is** performed computer-to-computer in an on-line, real-time, or batch mode. Subsection C.1., below, describes the procedures for CRT queries. Telephone query procedures are outlined in subsection C.2. (page 5-15). Subsection C.3. (page 5-16) describes the computer-to-computer methods used by TRIMIS and CHAMPUS FIs to confirm beneficiary entitlement to health care benefits.

1. Terminal-Based System

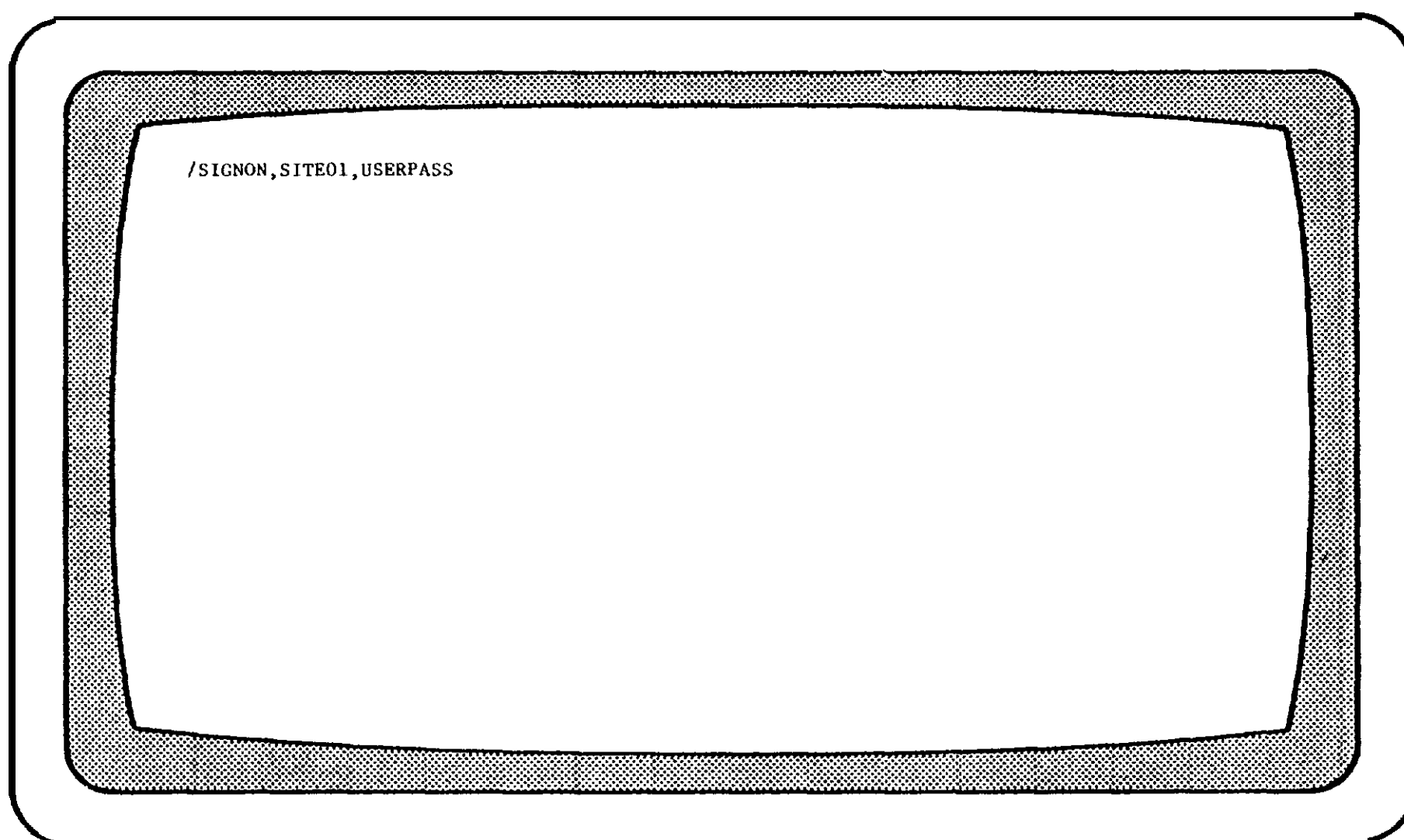
a. General. This subsection is only for those facilities having a CRT terminal for determining eligibility. Each site with this capability will have one or more CRT terminals. These CRT terminals will send data through a data set (modem), which then translates information into signals able to go through a phone line connected directly to the DEERS data base (computer). The CRT operator shall use ONLY the standard typewriter keys, except as directed by the DEERS computer operations or authorized service personnel. When each number or letter is struck, it will appear immediately on the **screen**. If you type an error, simply backspace to place the CURSOR (marker) under the error, or beginning of errors, type the correct entry, and continue typing. Training classes for terminal operators shall be conducted by the contractor before the start of eligibility checking. Detailed operating instructions for the DEERS eligibility inquiry terminals are provided in Appendix B.

b. Sign-On. Turn the brightness control dial **until** the information on the CRT screen is clearly visible. The screen will appear in either **of** two formats (see subparagraphs C. **1.d.** (3) and **C.1.d.** (4) on pages 5-12 and 5-13). In either case, the sign-on procedures are the same. The CURSOR should be positioned in the top left corner of the screen. If **itis** not, press the TAB key to return **it** to this position. To begin an inquiry session with the Eligibility System, the operator enters the **following in formation** on the terminal keyboard in the sequence listed (refer to illustration below):

- (1) The command to log on to the system: / SIGNON ,
- (2) The unique user identification code assigned by the DEERS Eligibility Center: SITE01 ,
- (3) The **unique** user password assigned by the DEERS Eligibility Center: USERPASS

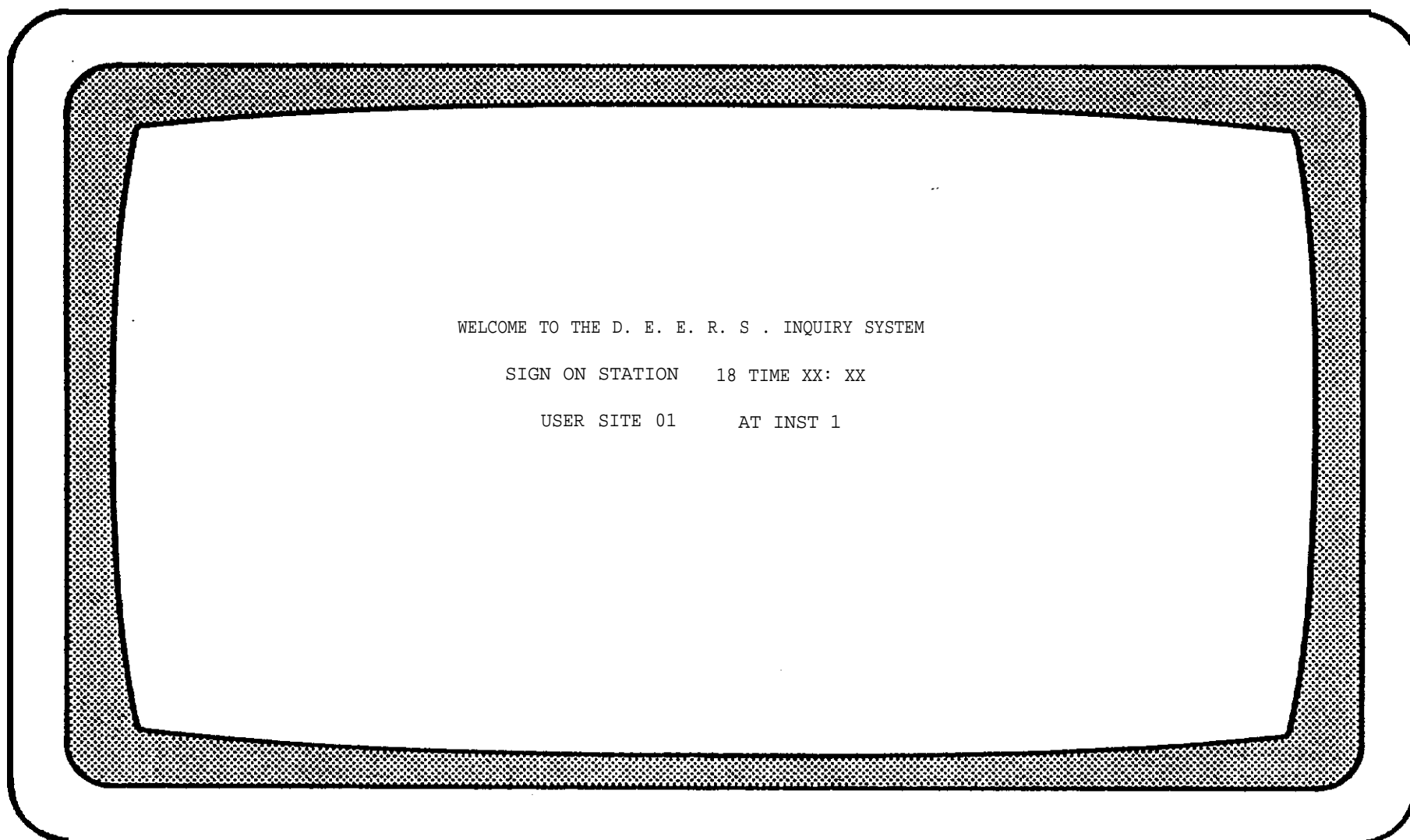
The Identification Code and Password must be kept confidential at **all** times.

The screen will now appear as shown below:



(4) Now press the ENTER key. At the bottom **of** the screen, just to the right **of** center, the phrase INHIBIT-WAITING will appear. This phrase appears when the ENTER key has been pressed, following a valid data entry. It indicates that the computer is processing the data entered.

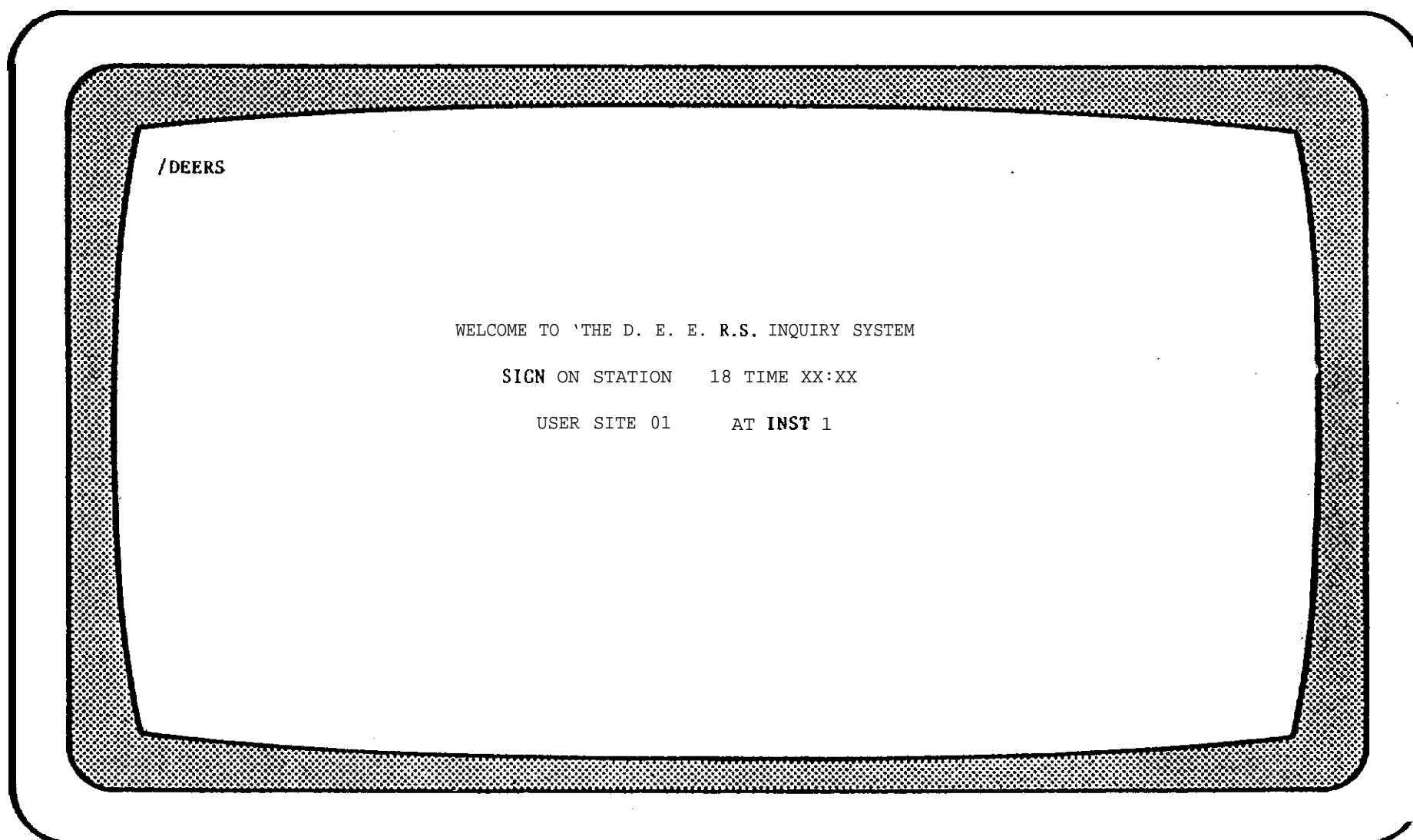
The screen will reappear with the following message:



The CURSOR will be positioned at the top left corner of the screen.

(5) Type in **/DEERS**.

The screen will appear as shown below:



(6) Press the ENTER key.

The screen will reappear with the Main Menu displayed. The activities you can perform are listed on the screen below:

```
FORM XXX

DEERS INQUIRY SYSTEM
**** DEERS INQUIRY MAIN MENU ****

THE FOLLOWING ACTIVITIES CAN BE PERFORMED:

1. INQUIRY (BY DEERS-ID/DOB)
2. SIGN-OFF
3. HELP SCREEN (CODES)

PLEASE SELECT AN ACTIVITY AND ENTER IT WERE: X

EST-TIME: XX:XX          DATE: XX/XX/XX
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(a) INQUIRY (BY DEERS-ID and DATE OF BIRTH). Use of this option enables the operator to obtain medical eligibility information on a specific individual, either a sponsor or dependent. See paragraph C.1.c. on the next page for instructions.

(b) SIGN-OFF. Use of this option logs the operator off of the DEERS PROGRAM when the eligibility checking session is complete. See paragraph C.1.d. on page 5-11 for instructions.

(c) HELP SCREEN (CODES). Use of this option provides the operator with a list of some of the codes used on the DEERS Eligibility Inquiry Screen and their definitions. See paragraph C.1.e. on page 5-14 for instructions.

c. Inquiry (By **DEERS-ID/DOB**). To initiate an inquiry, do the following:

- (1) Type the code 1 in the indicated area on the Main Menu Screen.
- (2) Press the ENTER key.

The screen will reappear as shown below:

FORM XXX		**** DEERS ELIGIBILITY INQUIRY ****				XX/XX/XX		XX: XX	
FMP	SSN	DOB	Sc	UC	SITE	TREATMENT DATES	NEXT	STATUS	BRANCH
						Xxxxxx TO xxxxxx	xx		
-----NAME-----		FMP S-----	DOB-----	AGE	PRIV-----	CONDI TION-----	RS		

The first time the **DEERS** Eligibility Inquiry Screen appears after Sign-On, all fields will be blank **except** for the fields TREATMENT DATES and NEXT.

- (a) The field TREATMENT DATES will contain today's date.
- (b) The field NEXT will contain the code IN.

The operator must now complete each **field**, as appropriate. The CURSOR automatically **will** appear at the Family Member Prefix (**FMP**) field. The operator should practice using the TAB key to become familiar with its response. Each **time** the TAB key is pressed, the CURSOR moves to the next or adjacent field or entry within a field. When an incorrect entry is made, press the TAB key until it returns to the appropriate **field** and then retype the correct entry.

- ### (3) Field Descriptions: FMP and SSN

The FMP and SSN fields, together, are ***referred to as the "DEERS-ID "*** field. The FMP is a two-character integer field used to identify a type of beneficiary. If the sponsor FMP (20) is used, only sponsor data **will** be displayed. A listing **of** DEERS FMP numbers **is** found in Figure 5-1 on page 5-19. Use of the FMP **is** optional.

NOTE : The CURSOR automatically will skip a space between the two dates.

(9) Field Description: NEXT

As mentioned earlier, when this screen is displayed, it will contain the letters IN for Inquiry. In order to complete the eligibility inquiry, this field must contain the letters IN.

The operator may change the code shown in the NEXT field and, thereby, change the type of activity in progress. The following codes may be entered in the NEXT field:

IN - DEERS Eligibility Inquiry Screen
MM- Main Menu Screen
so - Sign-Off Screen
HC - Help Screen (Codes)

After completing the DEERS-ID (FMP and SSN), DOB, SC, UC, SITE, TREATMENT DATES, and NEXT fields

(10) Press the ENTER key. When making an inquiry (IN), one of three conditions will occur:

(a) If the sponsor is enrolled, and the DOB of the sponsor or dependent entered matches the DOB on file, the DEERS Eligibility Inquiry Screen returned to you will appear as shown below:

FORM XXX		**** DEERS ELIGIBILITY INQUIRY ****						XX/XX/XX XX:XX	
FMP	SSN	DOB	SC	UC	SITE	TREATMENT DATES	NEXT	STATUS	BRANCH
XX	XXXXXXXXXX	XXXXXX	XX	XX	XXXXXX	XXXXXX TO XXXXXX	XX	XX	XX
-----NAME-----FMP S-----DOB-----AGE PRIV-----CONDITION-----RS									
XXXXXXXXXXXXXXXXXXXXXXXXXXXX		XX X	XX XXX XX	XX XXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXX				XX
XXXXXXXXXXXXXXXXXXXXXXXXXXXX		XX X	XX XXX XX	XX XXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXX				XX

(If, however, 999999 has been entered in the DOB field, the DOB entered did not match the DOB on file, or multiple beneficiaries exist for the DOB entered, the Family Display Screen will appear. Refer to subparagraph C.1. C.(10)(C) on page 5-10.)

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The DEERS Eligibility **Inquiry** Screen appears **in** two parts:

1 The first part of the screen refers to the sponsor.

2 The second part **of** the screen is for the beneficiaries **in** the sponsor's family grouping having the same DOB for which the inquiry was made. All sponsor data will be returned for a sponsor inquiry. When the inquiry is for other family members, sponsor privileges **will** not be shown.

The fields displayed on the second part of this screen are described below:

<u>FIELD NAME</u>	<u>DESCRIPTION</u>
HIT	This is actually a CURSOR position under the FMP field next to the names of the beneficiary or beneficiaries in the sponsor's family grouping. It is used to indicate whether the inquiry identified the individual or individuals for whom the inquiry was made.
NAME	The name of the beneficiary.
FMP	The beneficiary's Family Member Prefix (Figure 5-1).
s	The sex of beneficiary.
DOB	The beneficiary's date of birth. The format is DD MMM YY .
AGE	The age of the beneficiary.
PRIV	The privileges for which the beneficiary is authorized. MS - Medical care, Uniformed Services (Direct Care) MC - Medical care, Civilian source {CHAMPUS} MSMC - Medical care, both Uniformed Services and CHAMPUS NONE - Not eligible at all <u>or</u> only partially eligible for the dates shown under COVERED DATES
CONDITION	This field will display the word "ELIGIBLE" or "NOT ELIGIBLE" for the treatment dates specified. However, there are times when the beneficiary is not eligible for the entire period requested in the inquiry. When this occurs, the dates for which the individual is eligible will appear. An asterisk(*) will appear after a questionable date, and the covered dates will show only these dates for which the individual is eligible.
RS	This field will display the reason for ineligibility. It will be blank unless the beneficiary is not eligible -at all or the beneficiary is only partially eligible. If one of these conditions occurs, a two-digit End Reason Code will appear. Refer to the Help Screen for an explanation of these codes (see paragraph C.1.e. on page 5-14).

The CURSOR will appear under the HIT column next to the beneficiary requested. If the beneficiary listed is correct, no entry **is** required. If the beneficiary is not correct, enter a zero (0) in the HIT position next to that beneficiary.

Press the ENTER key. If the beneficiary was correct and no entry was made, the original DEERS Eligibility Inquiry Screen will appear with the CURSOR at the SSN position, ready for the next inquiry. If a zero was entered, the Family Display Screen will appear, so the correct beneficiary can be selected (see below).

(b) If the sponsor is not enrolled, the screen will return an error message indicating the reason.

(c) If a zero was entered in the HIT position, or if "999999" was entered in the DOB field, or the DOB entered did not match the DOB on file, or there were multiple people with the same DOB, the Family Display Screen will be returned to you, as shown below:

FORM XXX

*** FAMILY DISPLAY SCREEN ***

xx/xx/xx

xx: xx

***** XXXXXXXXXXXXXXXXXXXX *****

	INQ	NAME	FMP	SEX	DOB
ENTER	x	XXXXXXXXXXXXXXXXXXXX	XX	x	XX XXX XX
SELECTIONS --->					
	x	XXXXXXXXXXXXXXXXXXXX	XX	x	XX XXX XX
	x	XXXXXXXXXXXXXXXXXXXX	XX	x	XX XXX XX
	x	XXXXXXXXXXXXXXXXXXXX	XX	x	XX XXX XX

The Family Display Screen will have one of several messages typed below the screen title:

- 1 No more dependents to list.
- 2 More dependents to list - enter a "Y" to retrieve.
- 3 Duplicate sponsor SSN on data base - enter a "Y" to retrieve.
- 4 Error messages will appear if data has been entered incorrectly.

The CURSOR will appear at the Inquire (INQ) position (the position to the immediate left of the sponsor's name).

(d) If the message "No More Dependents to List" appears on the screen, indicate with a numeral one (1) the beneficiaries desired for inquiry (tab down to each appropriate position). When the desired numeral or numerals have been entered, press the ENTER key, and the Eligibility Inquiry Screen will

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reappear with the desired information. If the desired beneficiary or beneficiaries are not found on the Family Display Screen, enter the number zero (0) at the first or sponsor position. This zero may indicate a NO HIT for the sponsor or for two or more beneficiaries. IF A ZERO IS ENTERED, THE ENTRY WILL BE LOGGED AS A NO HIT AND THE ORIGINAL ELIGIBILITY INQUIRY SCREEN WILL REAPPEAR FOR THE NEXT INQUIRY.

(e) If the message *'More Dependents to List - Enter a "Y" to Retrieve" appears on the screen and the operator wishes to see the additional dependents, enter the letter **Y**. The screen will reappear with these dependents. If the operator does not wish to see these additional dependents (that is, **if** the beneficiary the operator is looking for is already displayed) , proceed as described in the preceding paragraph.

(f) If the message "Duplicate Sponsor SSN on Data Base - Enter a "Y" to Retrieve"" appears on the screen and the operator wishes to see the family of this sponsor, enter the letter **Y**. The screen will reappear with this family's information. If the operator does not **wish** to see this second family (that is, if the beneficiary the operator **is** looking for is already displayed) , proceed as described above.

d. Sign-Off

(1) From the Main Menu Screen, type in the numeral two (2) for the Sign-Off Screen. When using the DEERS Eligibility Inquiry Screen, type in the code **SO** in the NEXT field. When using the Help Screen, type in the code **SO** in the position indicated.

(2) Press the ENTER key. The screen will reappear as shown in the following illustration, with the CURSOR positioned to enter **/SIGNOFF**.

FORM XXX

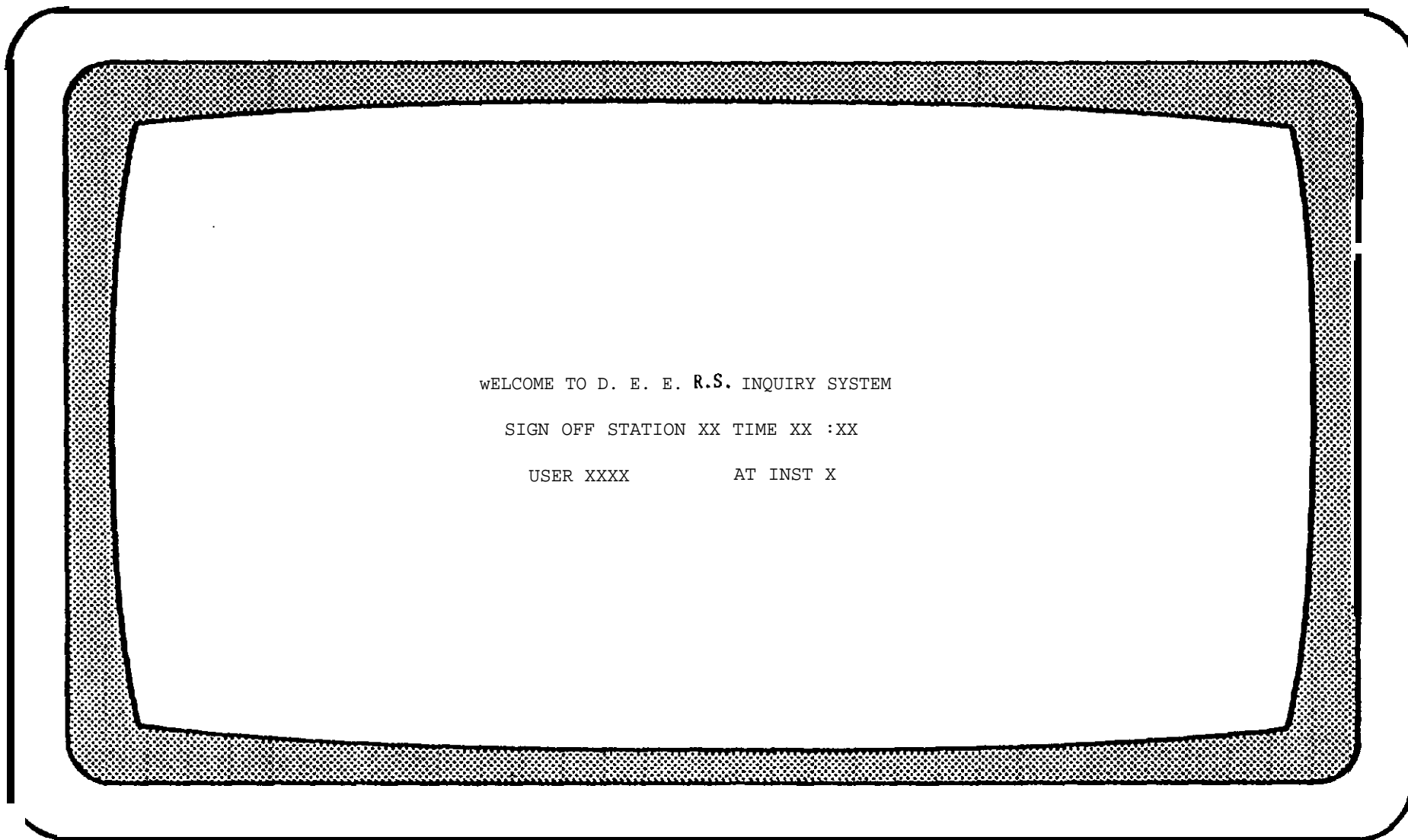
DEERS INQUIRY SYSTEM
SIGN-OFF SCREEN

DATE : XXXXXXXX
TIME: XX: XX

HAVE A GOOD DAY, GOOD BYE

(ENTER "/S IGNOFF" TO TERM INATE YOUR SESSION)

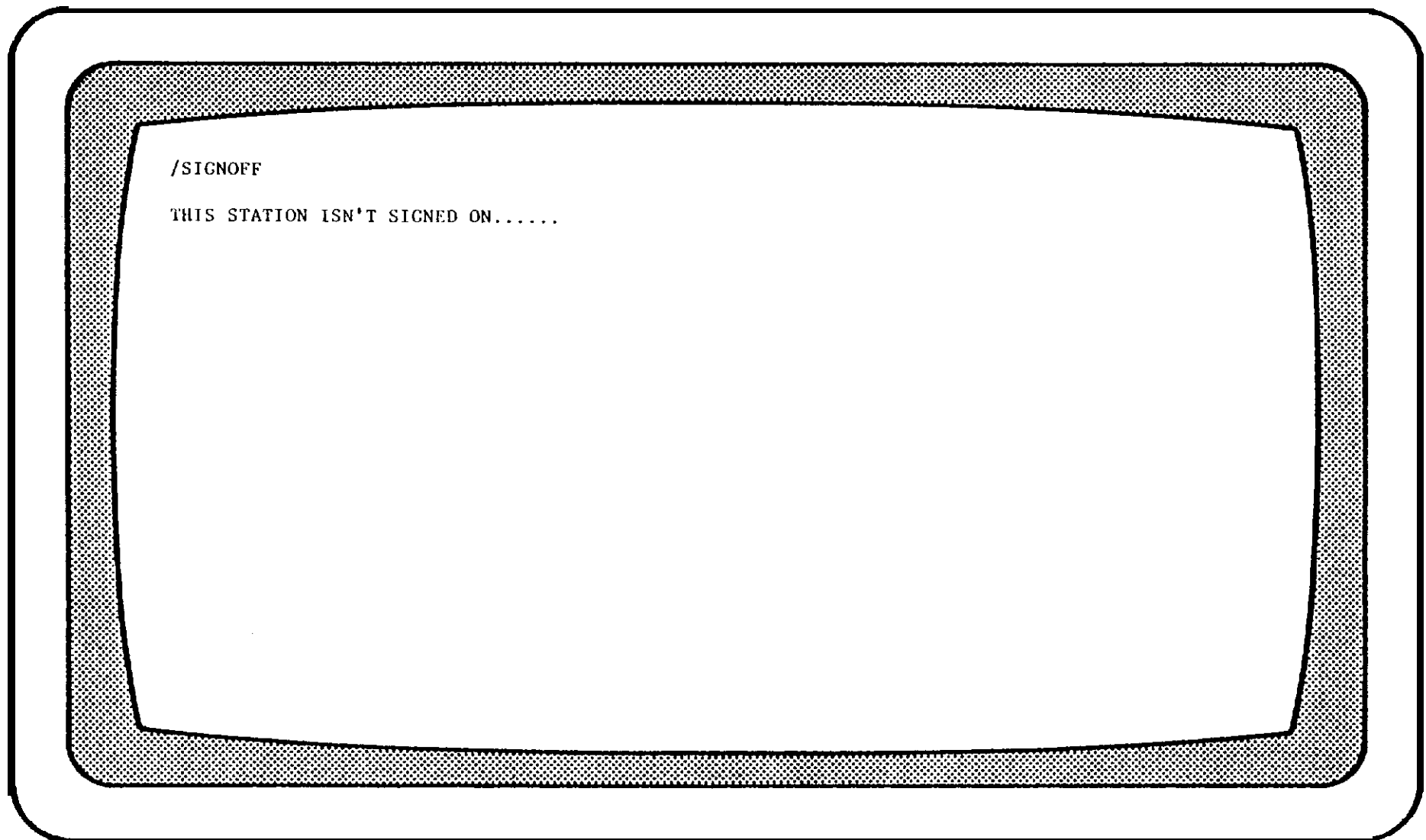
(3) To sign off the **DEERS** Inquiry System, type in **/SIGNOFF** and press the ENTER key. The screen will reappear as shown below:



Note: If there is a special notice or message from the **DEERS** Eligibility Center, it will be printed on the lower half of this screen.

This screen advises the operator that he or she has signed off of the **DEERS** Inquiry System. **The** computer terminal is still signed on to the Computer System. Signing off of the Computer System is optional. If no further entries are made, turn the brightness control down as low as it will go. Leave the power on.

(4) The CURSOR is now positioned in the upper left corner of the screen. To sign off the Computer System, which is optional, type in **/SIGNOFF**, and press the **ENTER** key. The screen will reappear as shown below:



Turn the brightness control down as low as it will go. Leave the power on.

e. Help Screen (Codes)

(1) To get this screen, type the code 3 on the Main Menu Screen. To return to the Main Menu Screen from the DEERS Eligibility Inquiry Screen, type MM in the NEXT field and press the ENTER key. An alternate and quicker way to get from the Inquiry Screen to the Help Screen is to type the code HC in the NEXT field, instead of MM, and press the ENTER key, thus by-passing the Main Menu Screen altogether.

(2) Press the ENTER key.

(3) The screen will reappear as below:

```

FORM XXX                DEERS INQUIRY SYSTEM                DATE:  ##/##/####
                        HELP SCREEN                          TIME:  ##:##

-----END REASON-----*-----END REASON-----*-----STATUS-----
00 = NOT PREDICTABLE *17=DEPN ON ACTIVE DUTY* ALJ = ACTIVE DUTY
01 = ACTIVE DUTY SEP * 18 = INVALID ENROLLMENT * AG = AIR NATIONAL GUARD
02 = SPON RETIREMENT* 19 = ENL ISTED CAREER * AS = ACADEMY STUDENT
03 = DEATH OF SPONSOR * 20 = SPONSOR NOT ON * CV = CIVILIAN
04 = MEDICAL CARE ENTITLE * MASTERFILE * OS = 100% DISABLED
05 = DIVORCE (SPOUSE) * 21 = ENL OF STUDENT STAT * FL = FOREIGN MILITARY
06 = ESTERN SERVICE * 99 = UNKNOWN * FN = FORMER MEMBER
07 = 21ST BIRTHDAY * ----- BRANCH ----- * FN = FOREIGN NATIONAL
08 = 23RD BIRTHDAY * NOM = NAT OCEANIC AND * LS = LIGHTHOUSE SERVICE
09 = INCAPACITATED * ATMOSPHERIC ADMN * MH = MEDAL OF HONOR
10 = MIL-ID EXPIRATION * PUBH = PUBLIC HEALTH SER * NG = NATIONAL WARD
11 = DEERS-DATE EXPIRE * ----- MEDICAL ----- * OC = NAVY OCS
12 = MARRIED (DIPS) * NS = MILITARY ONLY * OT = OTHER
13 = PAY GRADE CHANGE * MC = CHAMPUS ON 1, % * J'S = PHILIPPINE SCOUTS
14 = NO MASTER 1172 * MSNC = BOTH MILITARY * RC = RED CROSS
15 = ESTIMATED END OF * ANJ CHAMPUS * RS = RESEVIST
STUDENT STATUS * NONE = NO MEDICAL AT ALL * RT = RETIRED
16 = UNKNOWN RET DOB * * SS = SVC SEC DESIGNEE
                        * IIN = UNKNOWN

ENTER (MM,IN,SO) ---- ??
  
```

The Help Screen displays some of the codes used on the Eligibility Inquiry Screen, and provides definitions. The End Reason Codes appear in the RS field to explain why a beneficiary is not eligible at all or is only partly eligible. The codes for 5 Branches of the Uniformed Services are not listed on the Help Screen: USA, USN, USMC, USAF, and USCG. Medical Codes indicate eligibility for Uniformed Services and CHAMPUS health care. Status Codes are self-explanatory.

(4) To leave this screen, type MM for Main Menu Screen, IN for the DEERS Eligibility Inquiry Screen, or SO for the Sign-Off Screen in the position shown at the lower left corner of the screen.

(5) Press the ENTER key.

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2. Telephone-Based System

a. Telephone Type. The telephone line used for eligibility checks will be a rotary In-WATS telephone system. A rotary system means that when one of the **lines** at the Eligibility Center **is not being used, the incoming call will** automatically be transferred to that line. If a busy signal on the rotary line is received, all lines at the Eligibility Center are being used. Hang up and try again later.

b. During peak calling periods, it may be necessary to limit the number of inquiries per call to ensure that the maximum number of users are permitted to make inquiries. In the event that all lines are busy and operators have parties on hold, there will be a limit of 20 inquiries per call. Those users not completing their inquiries will be able to **call** during nonpeak hours to process inquiries without interruptions.

c. Eligibility-Checking Procedure. When an Eligibility Center operator answers the telephone, the following procedures shall be used to perform an eligibility check:

NOTE : When calling, remember to identify your facility and location.

(1) Supply the following information to the operator. An example of a call is included on the next page.

- (a) Site' name, location, and **approximate** number of inquiries.
- (b) **DEERS-ID** (an optional FMP and sponsor's SSN).
- (c) Date of birth of beneficiary if known; **if** not known, then 999999.
- (d) Security code, UCA Summary Account code, and site ID.
- (e) FROM date (**YYMMDD**) of treatment (if different from today's date).
- (f) TO date (**YYMMDD**) of treatment (if cliff erent from today's date) .

(2) The operator then shall perform an eligibility inquiry.

(3) If the beneficiary **is** found to be on file, the operator shall indicate that the beneficiary is enrolled in DEERS and is or **is** not eligible. When checking eligibility for more than one member of a family, each of the family members must be identified individually.

(4) If the beneficiary **is** not found on file, the operator shall indicate that the beneficiary does not appear to be enrolled **in** DEERS.

(5) This procedure is repeated until all beneficiaries have been checked; then the call is ended.

SAMPLE ELIGIBILITY CHECK CALL

OPERATOR : Good Morning. DEERS. This is Michelle. May I help you?

INQUIRER: Good Morning. This **is** Fort Mac, in San Antonio, TX.
I have 20 DEERS eligibility checks.

OPERATOR: Thank you. I am ready to begin.

(Fields)

(Example)

INQUIRER:	FMP (family member prefix - optional)	30
	SSN (social security number)	147938056
	DOB (date of birth)	450327
	SC (security code)	AC
	UC (UCA summary account code)	BA
	Site ID (six numbers)	135607
	Treatment Dates (if required)	811201 - 811215

OPERATOR: The beneficiary is Jane Smith, and she is eligible.

If the beneficiary is not eligible, the inquirer shall be informed of this fact and a reason for ineligibility shall be provided.

(This procedure is followed until all inquiries have been completed. It is not necessary to repeat SC and Site ID with each successive inquiry on the same phone call.)

INQUIRER: That's all **I** have for now.

OPERATOR : Thank you for calling DEERS. Goodbye.

3. Computer-to-Computer Systems

CHAMPUS and TRIMIS will have access to the Eligibility Data Base. CHAMPUS FIs shall use two applications: CHAMPUS claims development and CHAMPUS eligibility confirmation. TRIMIS also may be linked to the Eligibility System by means of a computer-to-computer interface. Operating instructions for these computer-to-computer interfaces are distributed separately.

a. CHAMPUS Claims Development. CHAMPUS FIs use CRTs to query the DEERS data **base** to develop claims that otherwise might be returned **because** of missing data or have to be developed by telephone or correspondence. The **FIs** access the DEERS data base for data elements that are missing from the claim, thereby allowing the processing cycle to continue without interruption. This timely acquisition of missing data provides better and faster service and reimbursement to the claimants and providers of service.

When claims history is available in the DEERS data base, the **FIs** and OCHAMPUS are able to access it by CRT for use **in** responding to inquiries and **in** recoupment processing.

b. CHAMPUS Eligibility y Confirmation. The primary CHAMPUS utilization of the DEERS data base is in providing timely confirmation of patient entitlement for medical care to the FIs who are processing CHAMPUS health claims.

(1) Interim Systems. Preliminary systems have been in effect in two FI operations for varying periods since October 1981.

(a) An on-line real time system was implemented at Blue Cross of Washington/Alaska (**BCWA**) as part of their existing claims processing system. For incoming claims for which no information is on the **FI** data base, an identification **query** is transmitted to the DEERS West Coast Eligibility Center, as the entry of claim data continues. When the **DEERS-ID** is available, an eligibility query **is** transmitted, with confirmation of status returned within 15 seconds. A Discrepancy Report is generated by BCWA to identify potential ineligible payments, as well as inconsistencies between the DEERS and **FI** data, and is forwarded to the DSO for resolution.

(b) A batch Eligibility System has been implemented by Mutual of Omaha. Prior to finalization, claims that passed Mutual of Omaha's system edits are batched and transmitted to the DEERS Eligibility Center at the end of the day. Eligibility is confirmed and results transmitted to Mutual of Omaha prior to the next work day.

(c) Appropriate logs and records are maintained to record sponsor/dependent NO HITS and other data necessary to evaluate the reliability of the data base and the impact of each system on the **FI** system.

(2) Final Systems. All FIs will have claimant eligibility confirmation capability in either an "on-line real-time" or "'batch'" system mode after these applications have been tested and evaluated by Department of Defense.

c. TRIMIS

(1) Initial System. TRIMIS is acquiring commercially available systems to support pharmacy, laboratory, patient records, and patient appointment system applications. Whenever feasible, a computer-to-computer interface **shall** be acquired and installed as a function available to the TRIMIS users.

(2) Registration/Admission, Disposition, and Transfer (R/ADT). TRIMIS is piloting a **R/ADT** system at **Keesler** Air Force Base. A **system-to-system** interface has been developed and implemented. **R/ADT** users submit DEERS inquiries as a part of patient in-processing for various items, such as inpatient admission and requesting an outpatient record. The **R/ADT** pilot **is** a demonstration system that will develop standards and procedures to be incorporated in the next generation of standard TRIMIS.

D. COMPLETING THE DEERS ENROLLMENT FOLLOW-UP FORM

1. After making an eligibility check, follow-up actions may be required in order to pass vital enrollment information back to Uniformed Service personnel systems.

2. MTF and DTF personnel **shall** prepare the DEERS Enrollment Follow-up Form, **DD** Form 2270 (Figure 5-3), in duplicate, **in** the following Instances:

(a) The patient or sponsor **is** not on the Eligibility File.

(b) There is incorrect information on the Eligibility File.

(c) For all births.

(d) For all deaths.

3. One copy of the completed **DD** Form 2270 shall be given to the patient or sponsor with instructions to contact the sponsor's Uniformed Service personnel office to correct noted discrepancies. One copy of the form shall be retained in a suspense file for future enrollment follow-up.

4. The Uniformed Service personnel office shall follow established policies and procedures to effect enrollment or necessary corrective actions.

5. Figure 5-4 is a flowchart of an eligibility check at an MTF or DTF.

DEERS FAMILY MEMBER PREFIX NUMBERS

Sponsor	20	
Spouse of Sponsor	30	Includes spouse of a deceased sponsor
Mother of Sponsor	40	Includes dependent adoptive mother
Father of Sponsor	45	Includes dependent adoptive father
Mother-in-law of Sponsor	50	
Father-in-law of Sponsor	55	
Eligible Dependent Children	01-19	
Not Elsewhere Classified	99	
Others	60-69	

Figure 5-.1

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UCA SUMMARY ACCOUNT CODES

Summary Account - 2 characters

AA - Inpatient Medical Care
AB - Inpatient Surgical Care
AC - Inpatient Obstetrical and Gynecological Care
AD - Inpatient Pediatric
AE - Inpatient Orthopedic
AF - Inpatient Psychiatric Care
BA - Ambulatory Medical Care
BB - Ambulatory Surgical Care
BC - Ambulatory Obstetrical and Gynecological Care
BD - Ambulatory Pediatric Care
BE - Ambulatory Orthopedic Care
BF - Ambulatory Psychiatric/Mental Health Care
BG - Ambulatory Family Practice Care
BH - Ambulatory Primary Medical Care
BI - Ambulatory Emergency Medical Care
BJ - Ambulatory Flight Medical Care
BK - Ambulatory Underseas Medicine Care
CA - Dental Services
CB - Type 3 Dental Prosthetic Lab
cc - Type 2 Dental Prosthetic Lab
DA - Pharmacy
DB - Pathology
DC - Radiology
DD - Special Procedures Services
DG - Same Day Services
DH - Rehabilitative Services
DI - Nuclear Medicine
FN - CHAMPUS

Figure 5-2

DEERS ENROLLMENT FOLLOW-UP FORM			
<p>This health care facility is using a computerized system to ensure that the medical treatment you are receiving is extended to only those persons entitled to Uniformed Services benefits. This system is called the Defense Enrollment Eligibility Reporting System — DEERS, for short. Enrollment in DEERS is mandatory and will eventually be used as the primary basis for extending benefits.</p> <p>We are reviewing the accuracy and timeliness of the information we have stored in our system. When we attempted to confirm your eligibility for care, we noted that:</p>			
1. DISCREPANCY:			
a. IF SPONSOR IS THE PATI ENT		b. IF DEPENDENT IS THE PATI ENT	
<input type="checkbox"/> Sponsor Not on DEERS File		<input type="checkbox"/> Sponsor Not on DEERS File	
<input type="checkbox"/> Sponsor's Name Spelled Incorrectly		<input type="checkbox"/> Patient Not on DEERS File	
<input type="checkbox"/> Sponsor's Date of Birth Incorrect		<input type="checkbox"/> Patient's Name Spelled. Incorrectly	
<input type="checkbox"/> Other		<input type="checkbox"/> Patient's Date of Birth Incorrect	
<input type="checkbox"/> Other		<input type="checkbox"/> Other	
2. SPONSOR'S NAME: LAST FIRST MIDDLE INITIAL		3. SPONSOR'S SSN:	
4. DEPENDENT'S NAME: 'As' FIRST MIDDLE INITIAL		5. DEPENDENT'S SSN:	
<p>You/Your sponsor should contact your/his or her service personnel office immediately to correct the noted discrepancy. Sponsors of dependents who are not yet enrolled in DEERS will be asked to provide legal documentation proving eligibility for each dependent to be enrolled.</p> <p>We regret any inconvenience you may have experienced as a result of DEERS, but we do need your help in resolving the discrepancy noted.</p> <p>Thank you for your assistance.</p>			
INSTRUCTIONS			
<p>This form shall be prepared by medical and dental treatment facility personnel in accordance with the following instructions and those contained in the DEERS Program Manual, DoD 1341,1-M, or in Service guidelines.</p> <p>BLOCK 1: If Sponsor is the patient, check appropriate box(es) in BLOCK 1a. If Dependent is the patient, check appropriate box(es) in BLOCK 1.b.</p> <p>BLOCKS 2, 3, 4, and 5: Self-explanatory.</p> <p>First sentence after BLOCK 5: Cross out inappropriate words. Example: If dependent is the patient, sentence should read: "You/Your sponsor should contact you/his or her service . . ."</p>			

Figure 5-3
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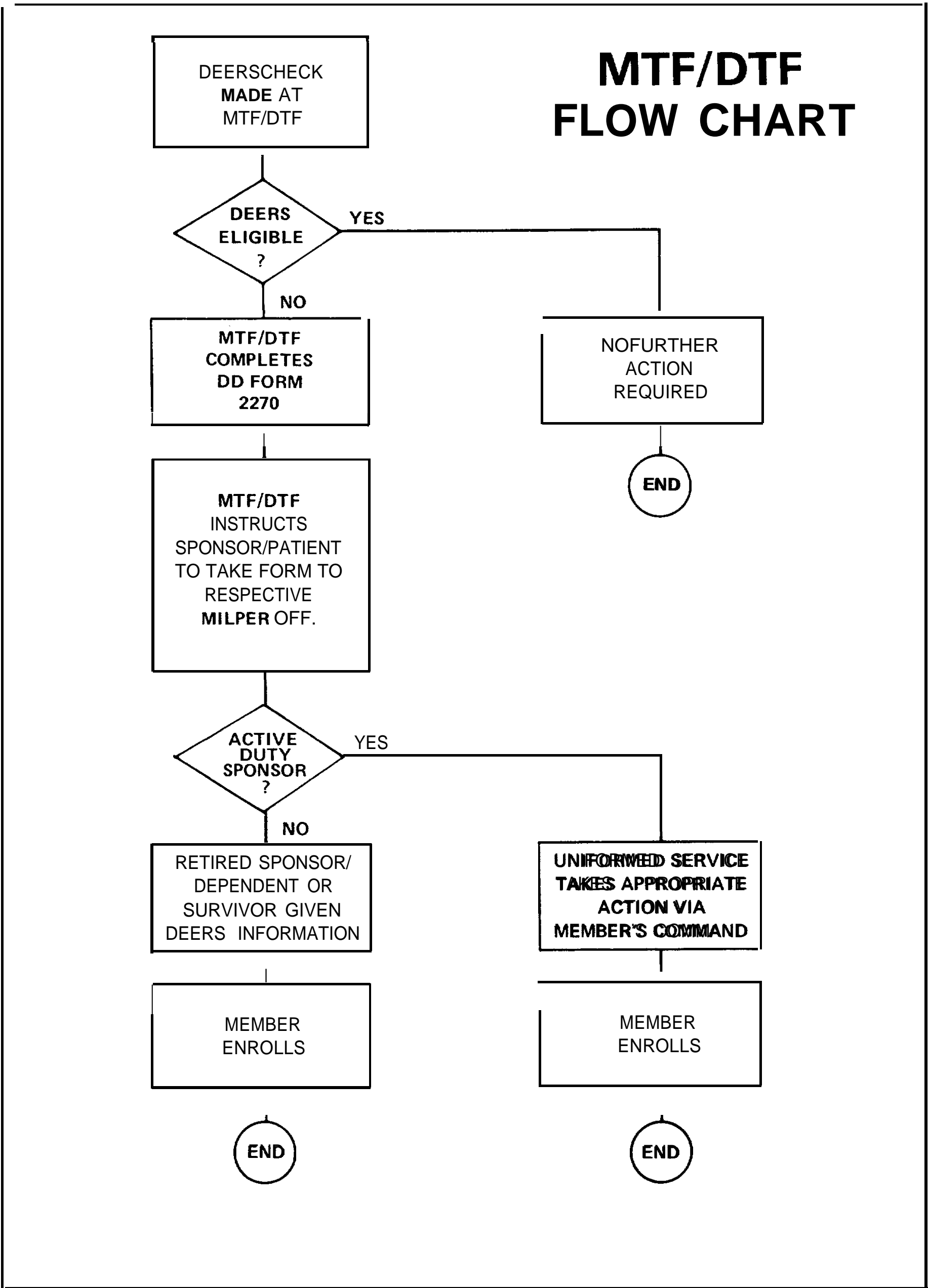


Figure 5-4

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